

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.
10624005

APPLICANT(S)

FILED DATE
AA-575

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5	3		3			
6						
7						
8						
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47						
48						
49						
50						
TOTAL IND.	5		1		1	
TOTAL DEP.	7		11		12	
TOTAL CLAIMS	12		12		12	

IND	DEP	IND	DEP	IND	DEP
51					
52					
53					
54					
55					
56					
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60					
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99					
100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					